Amended Interim Designation of Agent to Receive Notification of Claimed Infringement

Alternative Name(s) of Service Provider (including all names under which the ser provider is doing business):	
Address of Service Provi	der: 1201 N.E. Lloyd Blvd, Suite 500, Portland, OR 97232
Name of Agent Designa Notification of Claimed	ted to Receive Infringement: Deborah Harwood
or similar designation is not acce location):	ted Agent to which Notification Should be Sent (a P.O. Box eptable except where it is the only address that can be used in the geographic
2 2 11 2	Lloyd Blvd, Suite 500, Portland, OR 97232
Telephone Number of D	esignated Agent: (503) 453 = 8000
	esignated Agent: (503) 453 – 8000
	esignated Agent: (503) 453 – 8000 signated Agent: (503) 453 – 8223
Facsimile Number of De	
Facsimile Number of De Email Address of Design Identify the Interim Desig Date, so that it may be Re	signated Agent: (503) 453 – 8223
Facsimile Number of De Email Address of Design Identify the Interim Design Date, so that it may be Re Office: Integra Telecom of	signated Agent: (503) 453 – 8223 ated Agent: abuse@integra.net gnation to be Amended, by Service Provider Name and Filing adily Located in the Directory Maintained by the Copyright of Washington, Inc., Filed March 07, 2005
Facsimile Number of De Email Address of Design Identify the Interim Design Date, so that it may be Re Office: Integra Telecom of	signated Agent: (503) 453 – 8223 ated Agent: abuse@integra.net gnation to be Amended, by Service Provider Name and Filing addily Located in the Directory Maintained by the Copyright



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